

ISSUE SLIP STAPLE AREA ((for additional cross references))

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Sm</i>		<i>6/19/60</i>
O.I.P.E. CLASSIFIER		<i>40</i>	<i>6/23/60</i>
FORMALITY REVIEW		<i>DUI</i>	
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	6/19/60
2	✓	✓	6/19/60
3	✓	✓	6/19/60
4	✓	✓	6/19/60
5	✓	✓	6/19/60
6	✓	✓	6/19/60
7	✓	✓	6/19/60
8	✓	✓	6/19/60
9	✓	✓	6/19/60
10	✓	✓	6/19/60
11	✓	✓	6/19/60
12	✓	✓	6/19/60
13	✓	✓	6/19/60
14	✓	✓	6/19/60
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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